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APPLICANTS

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**** CONTINUING DATA *******
 This appln claims benefit of 60/300,253 06/21/2001

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY WA	SHEETS DRAWING 10	TOTAL CLAIMS 38	INDEPENDENT CLAIMS 6
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TITLE
 METHOD, APPARATUS AND ARTICLE FOR HIERARCHICAL WAGERING

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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